

**OFFICE OF THE MEDICAL EXAMINER  
Center for Forensic Medicine  
Nashville, Tennessee**

**REPORT OF INVESTIGATION BY COUNTY MEDICAL EXAMINER**

Trousdale County Medical Examiner: Alexander Badru M.D.

Judicial District Number: 15

District Attorney: Honorable Jason L. Lawson

**State Number: 21-85-0001**

**Case Number: MEC21-0816**

<b>Name of Decedent</b> Terry Deshawn Childress	<b>Age</b> 37 Years	<b>Race</b> Black	<b>Date of Birth</b> 01/30/1984	<b>Sex</b> Male
<b>Address</b> Trousdale Turner Correctional Facility - TDOC, 140 Macon Way, Hartsville, TN 37074				
<b>Date of Death</b> 02/24/2021 7:38 PM	<b>Type of Death</b> In Jail/Prison/In Police Custody	<b>Investigating Agency/Complaint #:</b> TN Department of Corrections		
<b>Place of Death</b> 140 Macon Way, Hartsville, TN				
<b>Narrative Summary</b> <p>decedent and his cellmate have been having escalating arguments. per report from the facility cellmate stated he was afraid for his life and took decedent life. decedent found on metal bedframe supine. has 2 parallel deep lacerations to RT occipital head approx 3cm and 4 cm. upon arrival, assessed by ambulance crew and found to be asystole all leads. i arrived as first responder with the ambulance to assist due to nature of call being unresponsive no pulse. blood splatter to back wall of cell near inmate head.</p>				
<b>Jurisdiction Accepted</b> Yes	<b>Autopsy Ordered</b> Yes	<b>Toxicology Ordered</b> Yes		
<b>Physician Responsible for Death Certificate</b> Erin M Carney, M.D.				
<b>Cremation Approved</b> No	<b>Funeral Home</b> Nelms Funeral Home			
<b>Cause of Death</b> Blunt force injuries of the head				
<b>Contributory Cause of Death</b>				
<b>Manner of Death</b> Homicide				

**OFFICE OF THE MEDICAL EXAMINER  
Center for Forensic Medicine  
850 R.S. Gass Blvd.  
Nashville, Tennessee 37216-2640**

**CASE: MEC21-0816**  
**County: TROUSDALE**

**AUTOPSY REPORT**

**NAME OF DECEDENT:** CHILDRESS, TERRY      **RACE:** Black    **SEX:** Male    **AGE:** 37

**DATE AND TIME OF DEATH:**                      February 24, 2021 at 7:38 p.m.

**DATE AND TIME OF AUTOPSY:**                      February 26, 2021 at 10:30 a.m.

**FORENSIC PATHOLOGIST:**                      Erin M. Carney, M.D.

**COUNTY MEDICAL EXAMINER:**                      Alexander Badru, M.D.

**DISTRICT ATTORNEY GENERAL:**                      Honorable Jason Lawson

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**PATHOLOGIC DIAGNOSES**

1. Blunt force injuries of the head:
    - A. Abrasions, lacerations, and ecchymoses.
    - B. Petechial and confluent hemorrhages of the eyes and lip mucosa.
    - C. Scalp, temporalis muscle, subdural, and subarachnoid hemorrhage.
    - D. Contusions of the brain.
    - E. Tongue hemorrhage.
  2. Other injuries:
    - A. Abrasions and ecchymoses.
    - B. Fractures of two left ribs.
- 

**CAUSE OF DEATH:**                      Blunt force injuries of the head

**MANNER OF DEATH:**                      Homicide

**CIRCUMSTANCES OF DEATH:**                      Beaten by assailant

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*I hereby certify that I, Erin M. Carney, M.D. have performed an autopsy on the body of Terry Childress on the 26th day of February, 2021 at 10:30 a.m. in the State of Tennessee Center for Forensic Medicine. The purpose of this report is to provide a certified opinion to the County Medical Examiner and District Attorney General. The facts and findings to support these conclusions are filed with the Tennessee Department of Health. The autopsy was performed in the presence of William McClain, M.D.*

## EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished (body mass index of 20.9 kilograms per meter squared), black male clad in a gray shirt, white shirt, white undershorts, and white socks. The body weighs 150 pounds, is 5 feet 11 inches in length, and appears consistent with the reported age of 37 years. Rigor is present to an equal degree in all extremities. Fixed lividity is on the posterior surface of the body, except in areas exposed to pressure. The scalp hair is brown and short. Facial hair consists of a mustache and hair on the lower lip and chin. The irides are brown. The corneas are hazy. The right sclera is unremarkable. The external auditory canals and oral cavity are free of foreign material and abnormal secretions. The teeth are natural and in fair condition. Skin slippage is on the left ear. The neck is without deformity or palpable masses. The abdomen is flat. The extremities are symmetric and without deformity. The fingernails are trimmed, lightly soiled, and intact, except for the right index fingernail and right middle fingernail which are broken. Tattoos are on the chest, right arm, and forearms. Needle tracks are not observed. Scars are on the right side of the chest, arms, left forearm, hands, left thigh, knees, legs, and left foot. Crusted abrasions are on the right side of the neck, right hand, and right leg. Brown patches are on the left side of the chest and right arm. The external genitalia are those of an adult male. The penis is circumcised and both testes are descended within the scrotum. The posterior torso exhibits a normal contour, and the anus is unremarkable.

**EVIDENCE OF THERAPY:** Defibrillator pads are on the body.

### EVIDENCE OF INJURY:

- 1. Blunt force injuries of the head:** A 2 x 1 inch area of abrasion is on the right frontotemporal scalp with red ecchymoses. Additional abrasions (1/2 x 1/4 inch and 3/4 x 3/8 inch) are on the right cheek. Abraded lacerations (3/4 inch and 1/2 inch) are on the right parietal scalp. Abrasions and superficial lacerations are on the left side of the lips. A 2-1/2 x 2 inch area of abrasions and edema is on the lateral left eyelids, left cheek, and left temple. A 1/2 inch superficial laceration is on the lateral left supraorbital ridge. Petechial hemorrhages are in the upper and lower palpebral and bulbar conjunctivae of the right eye and in the upper and lower lip mucosa. Diffuse hemorrhage is in the left sclera and conjunctivae of the left eye. Lacerations are in the left side of the lip mucosa and buccal mucosa. Blood is in the nares. Internal examination reveals diffuse hemorrhage in the temporalis muscles and lateral frontal, lateral parietal, and temporal scalp; subdural hemorrhage (more on the right cerebral hemisphere than the left), and subarachnoid hemorrhage of the inferior and lateral frontal lobes and inferior temporal lobes above the cerebellum. Cortical contusions are on the inferior and lateral frontal lobes, temporal lobes, and left parietal lobe. White matter contusions are in the left frontal lobe. Hemorrhage is in the tip of the tongue.
- 2. Other injuries:** Red ecchymoses are on the right arm, and an orange abrasion is on the right wrist. Abrasions are on the left middle finger and right leg. Internal examination reveals a fracture of the anterior aspect of left rib 4 with hemorrhage and of left rib 5 with minimal associated hemorrhage.

## INTERNAL EXAMINATION

**BODY CAVITIES:** The body is opened by the usual thoraco-abdominal incision and the chest plate is removed. No adhesions or abnormal collections of fluid are in the pleural, pericardial, or abdominal cavities. All body organs are in the normal anatomic position.

**HEAD:** The scalp is reflected. The calvarium of the skull is removed. The dura mater and falx cerebri are intact. There is no epidural. The leptomeninges are thin and delicate. The cerebral hemispheres are symmetrical. The structures at the base of the brain, including cranial nerves and blood vessels, are intact. There is no evidence of herniation. Coronal sections through the cerebral hemispheres reveal injuries as previously described. Transverse sections through the brain stem and cerebellum are unremarkable. The brain weighs 1470 grams.

**NECK:** Examination of the soft tissues of the neck by a layered anterior neck dissection, including strap muscles and large vessels, reveal no abnormalities. The larynx and trachea are normally formed and patent with unremarkable mucosa and scant bloody fluid. The hyoid bone and thyroid cartilage are intact. The cervical spine is unremarkable.

**CARDIOVASCULAR SYSTEM:** The pericardial surfaces are smooth, glistening, and unremarkable. The coronary arteries arise normally, follow the usual distribution with right dominant circulation, and are widely patent, without evidence of significant atherosclerosis or thrombosis. The chambers and valves exhibit the usual size-position relationship and are unremarkable. The myocardium is pink-brown, firm, and unremarkable; the atrial and ventricular septa are intact. The thickness of the heart walls as measured 1 cm below the atrioventricular valve annuli are as follows: right ventricle, 0.3 cm; left ventricle, 1.0 cm; and interventricular septum, 1.1 cm. The aorta and its major branches arise normally, follow the usual course and are widely patent, free of significant atherosclerosis and other abnormality. The vena cava and its major tributaries return to the heart in the usual distribution and are free of thrombi. The heart weighs 330 grams.

**RESPIRATORY SYSTEM:** The bronchi and bronchioles are free of foreign material; the mucosal surfaces are smooth, yellow-tan, and unremarkable. The pleural surfaces are smooth, glistening, and intact. The lungs exhibit normal lobar configurations. The pulmonary parenchyma is pink to red-purple, exuding slight to moderate amounts of bloody fluid; no focal lesions are noted. The pulmonary arteries are normally developed and patent, without thrombus or embolus. The right lung weighs 650 grams, and the left lung weighs 610 grams.

**HEPATOBIILIARY SYSTEM:** The hepatic capsule is smooth, glistening, and intact, covering dark red-brown parenchyma with no focal lesions. The gallbladder contains brown, mucoid bile; the mucosa is velvety and unremarkable. The extrahepatic biliary tree is patent, without evidence of calculi. The liver weighs 1540 grams.

**ALIMENTARY TRACT:** The tongue exhibits no evidence of recent injury. The esophagus is lined by a gray-white, smooth mucosa. The gastric mucosa is arranged in the usual rugal folds and the lumen contains 340 mL of tan fluid with white and orange food particles. The small and large intestines are unremarkable. The pancreas has a normal pink-tan lobulated appearance. The appendix is unremarkable.

**GENITOURINARY SYSTEM:** The renal capsules are smooth and thin, semi-transparent, and stripped with ease from the underlying smooth, red-brown cortical surfaces. The cortices are

sharply delineated from the medullary pyramids, which are red-purple to tan and unremarkable. The calyces, pelves, and ureters are unremarkable. The right kidney weighs 120 grams; the left kidney 140 grams. The urinary bladder contains 200 mL of urine; the mucosa is gray-tan and smooth. The prostate gland shows no focal lesions. The seminal vesicles and testes are unremarkable.

**RETICULOENDOTHELIAL SYSTEM:** The spleen has a smooth capsule covering a pink-purple, soft parenchyma; the lymphoid follicles are unremarkable. The regional lymph nodes appear normal. The spleen weighs 130 grams.

**ENDOCRINE SYSTEM:** The thyroid gland is symmetric without focal lesions. The parathyroid glands are inconspicuous. The adrenal glands and pituitary gland are unremarkable.

**MUSCULOSKELETAL SYSTEM:** Muscle development is normal. No bone or joint abnormalities are noted.

**TOXICOLOGY:** Blood and vitreous fluid are submitted for toxicologic analysis (see separate report).

**HISTOLOGY:** No tissue cassettes are submitted.

**ADDITIONAL STUDIES:** A full body postmortem radiograph is performed and reviewed.

#### SUMMARY OF CASE & OPINION

This 37-year-old black male, Terry Childress, was in jail when reportedly he and his cellmate were engaged in escalating arguments. Mr. Childress was found unresponsive in his cell with blood on the wall near his head.

Autopsy reveals blunt force injuries of the head including lacerations and abrasions, bleeding on the brain and in the scalp and tongue, and bruising of the brain. Mild organ pallor is noted. Two left ribs are fractured, possibly due to the assault and/or due to cardiopulmonary resuscitation (CPR). Postmortem toxicology testing of the blood is negative for drugs and alcohol.

The cause of death is blunt force injuries of the head, and the manner of death is homicide.

***\*\*Electronically signed by Erin M. Carney, M.D. on Wednesday, May 19, 2021\*\****

Erin M. Carney, M.D.  
Assistant Medical Examiner



## NMS Labs

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200 Welsh Road, Horsham, PA 19044-2208

Phone: (215) 657-4900 Fax: (215) 657-2972

e-mail: nms@nmslabs.com

Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

### Toxicology Report

Report Issued 03/09/2021 12:36

To: 10341

Forensic Medical Management Services - Nashville  
850 R.S. Gass Blvd.

Nashville, TN 37216

Patient Name CHILDRESS, TERRY

Patient ID 21-0816

Chain NMSCP100621

Age 37 Y DOB 01/30/1984

Gender Male

Workorder 21070520

Page 1 of 2

### Positive Findings:

None Detected

See Detailed Findings section for additional information

### Testing Requested:

Analysis Code	Description
8041B	Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic)

### Specimens Received:

ID	Tube/Container	Volume/ Mass	Collection Date/Time	Matrix Source	Labeled As
001	Gray Top Tube	11 mL	02/26/2021 11:23	Femoral Blood	21-0816
002	Red Top Tube	5 mL	02/26/2021 11:23	Vitreous Fluid	21-0816
003	White Plastic Container	58 mL	02/26/2021 11:23	Urine	21-0816

All sample volumes/weights are approximations.

Specimens received on 03/03/2021.

NMS v.21.0





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Workorder 21070520  
Chain NMSCP100621  
Patient ID 21-0816

Page 2 of 2

**Detailed Findings:**

Examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

**Sample Comments:**

001 Physician/Pathologist Name: CARNEY  
001 County: TROUSDALE COUNTY

Unless alternate arrangements are made by you, the remainder of the submitted specimens will be discarded one (1) year from the date of this report; and generated data will be discarded five (5) years from the date the analyses were performed.

Workorder 21070520 was electronically  
signed on 03/09/2021 11:13 by:

Erik Flail, B.A.  
Certifying Scientist

**Analysis Summary and Reporting Limits:**

All of the following tests were performed for this case. For each test, the compounds listed were included in the scope. The Reporting Limit listed for each compound represents the lowest concentration of the compound that will be reported as being positive. If the compound is listed as None Detected, it is not present above the Reporting Limit. Please refer to the Positive Findings section of the report for those compounds that were identified as being present.

Acode 8041B - Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic) - Femoral Blood

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

<u>Compound</u>	<u>Rpt. Limit</u>	<u>Compound</u>	<u>Rpt. Limit</u>
Amphetamines	20 ng/mL	Fentanyl / Acetyl Fentanyl	0.50 ng/mL
Barbiturates	0.040 mcg/mL	Methadone / Metabolite	25 ng/mL
Benzodiazepines	100 ng/mL	Methamphetamine / MDMA	20 ng/mL
Buprenorphine / Metabolite	0.50 ng/mL	Opiates	20 ng/mL
Cannabinoids	10 ng/mL	Oxycodone / Oxymorphone	10 ng/mL
Cocaine / Metabolites	20 ng/mL	Phencyclidine	10 ng/mL

-Analysis by Headspace Gas Chromatography (GC) for:

<u>Compound</u>	<u>Rpt. Limit</u>	<u>Compound</u>	<u>Rpt. Limit</u>
Acetone	5.0 mg/dL	Isopropanol	5.0 mg/dL
Ethanol	10 mg/dL	Methanol	5.0 mg/dL

NMS v.21.0